

STATE OF ARIZONA **COCONINO COUNTY** POLITICAL COMMITTEE **CAMPAIGN FINANCE REPORT**

FOR OFFICE USE ONLY

RECEIVED

1.	ROBBINS FOR SUPERIOR COURT JUDGE Full Name of Committee Address	AUG 2 6 2016 Coconino County Elections
	FLAG 51 AFF	3. ID# (6-000)
2.	Sponsoring Organization (if applicable) GARY REBBINS, SWERIOR CT., DIV, 5 Name of Candidate and Office Sought (if applicable)	Primary Election: August 30, 2016 General Election: November 8, 2016
were n	Whhms Iw a grant Com Committee E-mail Address Committee Fax #	Amended Report
4. I	Reporting Period (Please Check Appropriate Box)	Due Between
а	JANUARY 31ST REPORT - For Period of November 25, 2014 through December 31, 2015	Jan. 1 and Feb. 1, 2016
b	JUNE 30TH REPORT - For Period of January 1, 2016 through May 31, 2016	June 1 and June 30, 2016
С	PRE-PRIMARY ELECTION REPORT - For Period of June 1, 2016 through August 18, 2016	Aug. 19 and Aug. 26, 2016
d	POST-PRIMARY ELECTION REPORT - For Period of August 19, 2016 through September 19, 2016	Sept. 20 and Sept. 29, 2016
е	PRE-GENERAL ELECTION REPORT - For Period of September 20, 2016 through October 27, 2016	Oct. 28 and Nov. 4, 2016
f	POST-GENERAL ELECTION REPORT - For Period of October 28, 2016 through November 28, 2016	Nov. 29 and Dec. 8, 2016

5.	Summary	Column A Total This Reporting Period	Column B Election Period Total to Date
5a	Total Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		4
5b	Cash on Hand at the Beginning of this Reporting Period (ending balance from the previous reporting period)	530,40	
5c	Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	6	819.00
5d	Subtotal (add lines b and c for column A and add lines a and c for column B)	530,90 5 34, 0	819,00
6a	Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		
6b	Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	530,40	819,00
7.	Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d)	- Lyden	0

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2 2, ID# Committee Name 3. Report covering period of Column A Column B RECEIPTS This Period Campaign to Date 4. Contributions other than loans and in-kind: (a) Individuals - more than \$50 (Total from Schedule A) (b) Individuals - aggregate \$50 or less (Total from Schedule A-1) (c) Political Committees (Total from Schedule B) (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)] (e) Refund of contributions (Total from Schedule F-2) (f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)] (a) Loans made or guaranteed by candidate (Total from Schedule C) (b) All other loans (Total from Schedule C-1) (c) Total Loans [add 5(a) and 5(b)] 6. In-kind contributions (Total from Schedule E) 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1) 8. Total Receipts [add 4(f), 5(c), 6, and 7] DISBURSEMENTS 688,60 400,00 9. Expenditures for operating expenses (Total from Schedule D) 10. Independent Expenditures (Total from Schedule D-1) 11. Value of In-kind expenditures (Total from Schedule E) 12. Loans made by reporting committee (Total from Schedule D-2) 130,40 130,40 (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4) 13. (b) Repayment of all other loans (Total from Schedule D-5) (c) Total Loan Repayments [add 13(a) and 13(b)] 14. Transfers to other political committees (Total from Schedule D-6) 15. Any other disbursement (Total from Schedule D-7) 16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15] 17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3) 530,40 819.00 18. Total disbursements [subtract line 17 from line 16] 19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3) 20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true ROBBINS FOR KIRA RUSSU 8/26/16 Signature of Treasurer or Candidate of Designating Individual

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

1. Committee Name

POBBINS FOR SUPERVOR COURT

	SCHEDULE	A
2. ID#		

	3. Report covering period from	1 JUNG 1-	ANG 18 thr	u Ano	18	
4		CONTRIBUTIONS		DATE	AMOUNT RECEIVED THIS	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OC	CUPATION AND EMPLOY	ER OF CONTRIBUTOR	RECEIVED	PERIOD	CAMPAIGN TO DATE
a	Name					
	Street Address					
	City	State	Zip			
	Occupation	Employer		-		
b	Name					
	Street Address					
	City	State	Zip	1 /		
	Occupation	Employer		- Appendix		The state of the s
С	Name		and the second s			
	Street Address					
	City	State	Zip			
	Occupation	Employer	and the second s			
d	Name		and the second s			
	Street Address					
	City	State	Zip	_		
	Occupation	Employer				
е	Name					
	Street Address					
	City	State	Zip			

*If contributions of \$50 or less are listed with contributors name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [Transfer total to Detailed Summary Page, Line 4(a), Column A]

Employer

Occupation

Schedule A Page _____ of ____

4. Aggregate Total of Contributions of \$50 or less

DESCRIPTION	AMO ¹	UNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NONE			
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b) Column A]	CAMP/ total to	MULATIVE TOTAL THIS NGN TO DATE [Transfer Detailed Summary Page, o), Column 13]	

^{*}If contributions of \$50 or less are listed with contributors name and address on Schedule A, do not include them on this schedule. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

1.	Committee Name			Ĺ
3.	Report covering period from		thru	······································
		CONTRIBUTIONS	AMOUNT RECEIVED THIS	CUMULATIVE TOTAL THIS CAMPAIGN TO
4.	IDENTITY	OF CONTRIBUTOR AND DATE RECEIVED	PERIOD	DATE
a	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
b	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
¢	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED		part of the same o	
d	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
		/		
е	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
f	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
g	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
i	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
5,,,/	ENTER TOTAL ONLY IS LAST	PAGE OF SCHEDULE B [if last page of Schedule B, transfer		
	total to Detailed Summary Page			

Schedule 8 Page _____ of ____

CANDIDATE LOANS

SCHEDULE C

2. ID#

	Report covering pe	ariad from	······································		thru			
	LOAN	S MADE OR GUA	RANTEED E	BY CANDIDATE		DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4. 4a	Last	First		Initial				/ / /
	Street Address							
	City		State	Zip			1	
	Description							
b	Last	First	All and the second seco	Initial				
	Street Address					,	amb de la companya de	
	City		State	Zip		Market and the second		
	Description					and the second second		
С	Last	First		Initial				
	Street Address			and the second s				
	City		State	Zip				
	Description			and the second s				
d	Last	First	/	Initial				
	Street Address City		State	Zip				
	Description		, Jiaie	£- F P				
е	Last	First		Initial				
	Street Address	/	***************************************					
	City		State	Zip				
	Description							
5.	ENTER TOTAL O	F LOANS MADE OR G	HARANTEED E	RY CANDIDATE ONLY	(IF LAS	PAGE OF SCHED	III F C lif last nage	
	of Schedule C, trai	nsfer total to Detailed S	Summary Page,	Line 5(a), Column A]	11 L/10:	THE OF BOTTLE	our of the sector hade	

Schedule C Page _____ of ____ revised 12/2013

OTHER LOANS

SCHEDULE C-1

1-	Committee Name		2. ID#	na manusa magna antara magna antara manana mana
٥.	Report covering period from thru			
4.	ALL OTHER LOANS NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OF LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
а	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip Description		p p p p p p p p p p p p p p p p p p p	
Ď	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip	Jure Parker		
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
2	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Address			
	City, State, Zip			
	Description			
j	NAME OF PERSON OR COMMITTEE MAKING LOAN AND ID#			
	Street Address			
	City, State, Zip			
	NAME OF ENDORSER OR GUARANTOR OF LOAN			
	Street Addréss			
	City, State, Zip			
	Description			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [if last page of Schedule to Detailed Summary Page, Line 5(b), Column A]	C-1, transfer total		
	to because obtaining rage, the o(o), odition of			

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D 2. ID# 1 . Committee Name 3. Report covering period from thru DATE AMOUNT **EXPENDITURES** EXPENDITURE OF THE MADE **EXPENDITURE** NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE 4. CENSTON/BERGER Zip 8600 4 1/13/16 400,00 State LAGGIMA Description of Items or Services Purchased CONTPUBLITION Name Street Address City Zip State Description of Items or Services Purchased Name Street Address State Zip Description of Items or Services Purchased d Name Street Address State Zip Description of Items or Services Purchased Name Street Address State Zip Description of Items or Services Purchased Name Street Address State Zip City Description of Items or Services Purchased ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed

Summary Page Line 9, Column A]

Schedule D Page	of
	revised 12/2013

INDEPENDENT EXPENDITURES* **SCHEDULE D-1** 2. ID# 1. Committee Name Report covering period from DATE AMOUNT INDEPENDENT EXPENDITURES OF THE EXPENDITURE MADE EXPENDITURE IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITED OR OPPOSED Name Street Address State Zip Purpose and Description of Purchase Benefited Opposed Year of Election Candidate Office Sought Name Street Address State Zip City Benefited Purpose and Description of Purchase Opposed Year of Election Office Sought Candidate Name Street Address State Purpose and Description of Purchase Benefited | Opposed Office Sought Year of Election Candidate ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [if last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A] * SEE A.R.S. §16-901(14) I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the request or suggestion of any candidate or any campaign committee or agent of that candidate. Signature of Treasurer

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS AMOUNT

Schedule D-1 Page _____ of _

LOANS MADE BY REPORTING COMMITTEE **SCHEDULE D-2** 1. Committee Name 3. Report covering period from thru

4.	LOANS	MADE BY THE REPO	ORTING COMM	ITTEE	DATE LOAN	AMOUNT OF
		ID# OF COMMITTEE TO W	HOM LOAN (DISBL	IRSEMENT) WAS MADE	MADE	LOAN
а	Committee Name			ID#		
						/
İ	Address					
	City	State	Zip			/
L						
b	Committee Name			ID#		
						1
	Address					
1	City	TCtota	7i		/	}
	City	State	Zip		1	ļ.
6	Committee Name			IID#		
ľ	Committee Name					
	Address					
					Ì	
	City	State	Zip			
	ļ ·					
d	Committee Name			ID#		
	Address					
	City	State	Zip			
<u> </u>				ID#		
e	Committee Name		/	10#		
1	Address					
	Address					
	City	State /	Zip			
	,		'			
f	Committee Name			ID#		
1	Address					
l	City	State	Zip			
<u>_</u>		<u> </u>		I+C4		
9	Committee Name			ID#		
	Ladana /	7				
	Address					
	City	State	Zip			
	l Oity	Ciulo				
h	Committee Name			ID#		
1	Appendix 1					
	Address					
	City	State	Zip		1	
	/					
Г						
5	ENTER TOTAL ONLY IF LAST PAG	SE OF SCHEDULE D-2 [if last page	e of Schedule D-2, trans	sfer total to Detailed Summary Pa	ge, Line 12, Column A)	

OFFSETS TO OPERATING EXPENSES*

	SCHEDULE	D-3
2. ID#		

	1. Committee Name			
	Report covering period from	thru		
		DATINO EVOCUOCO		
4.	REBATES, REFUNDS AND OTHER OFFSETS TO OPE NAME AND ADDRESS FROM WHOM REFUND OR REBATE		DATE REFUND RECEIVED	AMOUNT OF THE REFUND
а	Name	. WAS RECLIVED	RECEIVED	ALFOND /
	Street Address			
	City State	Zip		
	Description of Refund			
b	Name			
	Street Address			
	City State	Zip	aper production of the second	
	Description of Refund			
С	Name			
	Street Address			
	City State	Zip		
	Description of Refund		:	
d	Name			
	Street Address			
	City State	Zip		
	Description of Refund			
e	Name			
	Street Address			
	City State	Zip		
	Description of Refund			
f	Name			
	Street Address		1	
	City State	Zip	;	
į	Description of Refund			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 [if last page of Schedule D-3, t	transfer total to Detailed Summary Pag	ie, Line 17, Column A)	
	* Includes return of contributions made by reporting committee		<u></u> j	
	modes retain or contributions made by reporting committee		Schedule D-3 Pa	geof

REPAYMENT OF CANDIDATE LOANS

	SCHEDULE	D-4
2.	ID#	

	1. Committee Name			,	
	3. Report covering period from		thru		
4.	REPAYMENT OF LOANS MAD			DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
а	Name ARY E. ROBB			/ /	12 : 46
b	City FLAGS/AFF	State A-2	zip 86001	7/21/16	130,40
Ü	Street Address				
	City	State	Zip		
С	Name				
	Street Address City	State	ZIp		
			and the second s		
đ	Name				
	Street Address	Market and the second			
	City	State	Zip		
ė	Name	and the state of t			
	Street Address				
	City	State	Zip		
f	Name				
	Street Address				
	City	State	Zip		
క	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-	4 [if last page of Schedule D-4, tr	ansfer total to Detailed Summary Pag	e, Line 13(a), Column A)	

Schedule D-4 Page _____ of ____

REPAYMENT OF OTHER LOANS

Committee Name

OTHER LOANS	SCHEDULE D-5
	2. ID#

	3. Report covering period from thru		
4.	REPAYMENT OF ALL OTHER LOANS	DATE	AMOUNT OF THE
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	REPAYMENT MADE	REPAYMENT
â	Name and ID Number		
	Street Address		part of the second
	City State Zip	,	
b	Name and ID Number	And the state of t	
	Street Address	and the state of t	
	City State Zip		<u>.</u>
С	Name and ID Number		
	Street Address		
	City State Zip		
ď	Name and ID Number		
	Street Address		
	City State Zip		
е	Name and ID Number		
	Street Address		
	City State Zip	ł	
f	Name and ID Number		
	Street Address		
	City State Zip		
, part			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 (if last page of schedule Transfer total to Detailed Summary Page	, Line 13(b), Column A]	

thru

Schedule	D-5	Page_	0	f
				4010046

	TRANSFERS TO 01	HER POLITION	CAL COMMITTEES		CHEDULE D-6
	1. Committee Name			2. ID#	
	Report covering period from		thru		
4.	TRANSFERS MADE	BY THE REPOR	TING COMMITTEE		ANIOUNT OF THE
	NAME, ADDRESS AND ID# TO V	VHOM TRANSFER ([DISBURSEMENT) WAS MADE	DATE TRANSFER WAS MADE	AMOUNT OF THE TRANSFER
а	Name and ID Number	· · · · · · · · · · · · · · · · · · ·			
	Street Address				
	City	State	Zip		
b	Name and ID Number				
	Street Address				
	City	State	Zip	Andrew Control of the	
С	Name and ID Number				
	Street Address				
	City	State	Zip , m ^m		
d	Name and ID Number		and the state of t		
	Street Address	and the state of t			
	City	State	Zip		
e	Name and ID Number	and the state of t			
	Street Address				
	City	State	Zip		

Zip

State

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]

Name and ID Number

Street Address

City

Schedule D-6		Page	01	
			revised	12/2013

ANY OTHER DISBURSEMENT

SCHEDULE D-7

	1. Committee Name			
	3. Report covering period from thr	1	***************************************	
4.	ANY OTHER DISBURSEMENT		DATE DISBURSEMENT	AMOUNT OF THE DISBURSEMENT
а	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WA	S MADE; DESCRIPTION	MADE	
a				
	Street Address			
	City State Zip			
	Description		/	
b	Name and ID Number		James Park	
	Street Address			
	City State Zip			
	Description		<i>,</i> "	
-	Name and ID Number	/_		
С				
	Street Address	and the second second		
	City State Zip			
	Description			
d	Name and ID Number			
	Street Address			
	City State Zip			
	Description			
е	Name and ID Number			
	Street Address		and the same of th	
	City State Zip			
	Description			
f	Name and ID Number			
	Street Address			
	City State Zip			
	Description			
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [if last page of Schedule D-7, transf	er total to Detailed Summary Page	e, Line 15, Column A]	

Schedule D-7 Page _____of___revised 12/2013

		TONS and EXPENDITURES	S (2. ID#	CHEDULE E
	1. Committee Name			WARRIST TO THE RESIDENCE OF THE PROPERTY OF TH
	3. Report covering period from	thru		
	IN-KIND CONTRIBUTION	ONS and EXPENDITURES		T CALD MADKET
4.	1	ADDRESS AND ID# OF THE POLITICAL COMMITTEE) /ED OR TO WHOM GIVEN	DATE	FAIR MARKET VALUE
а	Name, Address, City, State, Zip, and ID#	CONTRIBUTION EXPENDITURE		
	Description			and the second
	Occupation	Employer	and the second s	
b	Name, Address, City, State, Zip, and ID#	CONTRIBUTION		
		EXPENDITURE	!	
1	Description		1	
	Occupation	Employer	!	
С	Name, Address, City, State, Zip, and ID#	CONTRIBUTION	7	
ļ		EXPENDITURE	ļ	
	Description			
	Occupation	Employer		
d	Name, Address, City, State, Zip, and ID#	CONTRIBUTION		
		EXPENDITURE		
	Description	1		
	Occupation	Employer		
5	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF S	SCHEDULE E [if last page of Schedule E, transfer total to Detailed Summary P	Page, Line 6, Column A]	

6 ENTER TOTAL IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E (if last page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A)

Schedule	Ε	Page	of	
			revised	12/2013

DIVIDENDS, INTERES	I, AND OTHER RECEIPTS	SCHEDULE F-1
		2, ID#
1. Committee Name		
2. Depart according ported from	No.	
Report covering period from	thru	

[DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE	AMOUNT
4.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM THE RECEIPT WAS RECEIVED	RECEIVED	OF THE RECEIPT
а	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt	, and a	
b	Name and ID Number		
	Street Address		
	City State Zip	and the state of t	
	Description of Receipt		
С	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
d	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
е	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt		
f	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Receipt	<u> </u>	
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-11 [if last page of Schedule F-1, transfer total to Detailed Summary P	age, Line 7, Column A)	
			L

Schedule	F-1	Page		of	
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OFFSETS TO CONTRIBUTIONS RECEIVED*	SC 2. ID#	HEDULE F-2
1, Committee Name		
3. Report covering period from thru		
REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND	AMOUNT OF THE
NAME AND ADDRESS OF INDIVIDUAL (OR NAME AND ID# OF THE POLITICAL COMMITTEE) WHOM THE REFUND WAS MADE; DESCRIPTION		REFUND
Name and ID Number		
Street Address		
City State Zip		
Description of Refund	7	
Name and ID Number		
Street Address	\exists /	
City State Zip		
Description of Refund		
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	Description of Refund		
	Name and ID Number		
	Street Address		
-	City State Zip		
	Description of Refund		
	Name and ID Number		
	Street Address		
	City State Zip		
	Description of Refund		
	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [if last page of Schedule F-2, transfer total to Detailed	Summary Page, Line 4(e), Column A]	
5.	*Includes return of contributions received by reporting committee		
		Schedule F-2 Page of	

DEBTS AND OBLIGATIONS (Exc	SCH	SCHEDULE F-3		
1. Committee Name			2.10#	
3. Report covering period from	thru thru			
DEBTS AND OBLIGATIONS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT INCURRED THIS PERIOD	PAYMENT THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Name, Address, City, State, Zip, and ID#				
Description of Debt				
Name, Address, City, State, Zip, and ID#				
Description of Debt	ne sa			
Name, Address, City, State, Zip, and ID#				
Description of Debt				
Name, Address, City, State, Zip, and ID#				
Description of Debt				
Name, Address, City, State, Zip, and ID#				

Schedule F-3 Page ____ of ____ of ____ revised 12/2013

ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [if last page of Schedule F-3, transfer total to Detailed Summary Page, Line 19, Column A]

Description of Debt